

11-26-09
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27194 7590 08/24/2004

HOWREY SIMON ARNOLD & WHITE, LLP
C/O M.P. DROSOS, DIRECTOR OF IP ADMINISTRATION
2941 FAIRVIEW PK
BOX 7
FALLS CHURCH, VA 22042
11/29/2004 NNGUYEN2 00000122 10087551

01 FC:1504 300.00 OP
02 FC:8001 3.00 OP
03 FC:1504 APPLICATION NO. FILING DATE OP

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Jennifer Altman

(Depositor's name)

Jennifer Altman

(Signature)

Nov. 23, 2004

(Date)

10/087,551	02/27/2002	Jose L. Boyer	03678.0103.CPUS00	6893
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TITLE OF INVENTION: COMPOSITIONS AND METHODS FOR THE TREATMENT OF GLAUCOMA OR OCULAR HYPERTENSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	YES	\$665	\$300	\$965	11/24/2004
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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LEWIS, PATRICK T	1623	514-051000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Howrey Simon Arnold and White 2. <u>Viola T. Kung</u> 3. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Inspire Pharmaceuticals, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**422 Emperor Blvd. Suite 470
Durham, North Carolina 27703**Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 1

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A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Viola T. KungDate November 23, 2004Typed or printed name Viola T. KungRegistration No. (41,131)

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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